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APPLICANTS

Henry W. Koertzen, Hillsboro, OR;
 Lilly Huang, Portland, OR;
 John T. Sprietsma, Portland, OR;

** CONTINUING DATA *****
None

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature _____ Initials _____	STATE OR COUNTRY OR	SHEETS DRAWING 5	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 4
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ADDRESS
 21186
 SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.
 P.O. BOX 2938
 MINNEAPOLIS , MN
 55402-0938

TITLE
 Power supply method and apparatus

FILING FEE RECEIVED 932	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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